

RECEIVED 001
CENTRAL FAX CENTER

MAY 25 2005

FAX TRANSMISSION**DATE:** May 25, 2005**PTO IDENTIFIER:** Application Number 09/847901-Conf. #7510
Patent Number**Inventor:** Masajiro INOUE et al.**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (703) 872-9306**FROM:** LAHIVE & COCKFIELD, LLP

Anthony A. Laurentano

PHONE: (617) 227-7400**Attorney Dkt. #:** SIW-008RCE**PAGES (Including Cover Sheet):** 17**CONTENTS:** Fee Transmittal (1 page, in duplicate)
Three Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)
Amendment After Final Action (37 C.F.R. Section 1.116) (11 pages)
Amendment Transmittal (1 page)
Charge \$1,020.00 to deposit account 12-0080
Certificate of Transmission (1 page)

If your receipt of this transmission is in error, please notify this firm immediately by collect call to sender at (617) 227-7400 and send the original transmission to us by return mail at the address below.

This transmission is intended for the sole use of the individual and entity to whom it is addressed, and may contain information that is privileged, confidential and exempt from disclosure under applicable law. You are hereby notified that any dissemination, distribution or duplication of this transmission by someone other than the intended addressee or its designated agent is strictly prohibited.

LAHIVE & COCKFIELD, LLP
28 State Street, Boston, Massachusetts 02109
Telephone: (617) 227-7400 **Facsimile:** (617) 742-4214

RECEIVED
MAY 26 2005
OIFE/JCWS

PTO/SB/97 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U. S. Patent and Trademark Office; U. S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Application No. (if known): 09/847901

Attorney Docket No.: SMV-008RCE

Certificate of Transmission under 37 CFR 1.8

I hereby certify that this correspondence is being facsimile transmitted to (703) 872-9306 at the United States Patent and Trademark Office.

on May 25, 2005
Date


Signature

Anthony A. Laurentano

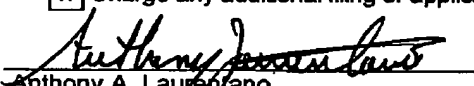
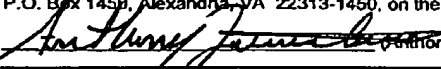
Typed or printed name of person signing Certificate

38,220
Registration Number, if applicable

(617) 227-7400
Telephone Number

Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

Fee Transmittal (1 page, in duplicate)
Three Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)
Amendment After Final Action (37 C.F.R. Section 1.116) (11 pages)
Amendment Transmittal (1 page)
Charge \$1,020.00 to deposit account 12-0080

AMENDMENT TRANSMITTAL LETTER			Docket No. SIW-008RCE	
Application No. 09/847901-Conf. #7510	Filing Date May 2, 2001	Examiner R. Alejandro	Art Unit 1745	
Applicant(s): Masajiro INOUE <i>et al.</i>				
Invention: FUEL CELL HAVING SEALANT FOR SEALING A SOLID POLYMER ELECTROLYTE MEMBRANE				
TO THE COMMISSIONER FOR PATENTS				
Transmitted herewith is an amendment in the above-identified application.				
The fee has been calculated and is transmitted as shown below.				
CLAIMS AS AMENDED				
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate
Total Claims	6	- 20 =		x
Independent Claims	3	- 3 =		x
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				
Other fee (please specify): Extension for response within third month				1,020.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:				1,020.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity <input type="checkbox"/> No additional fee is required for this amendment. <input checked="" type="checkbox"/> Please charge Deposit Account No. <u>12-0080</u> in the amount of \$ <u>1,020.00</u> . A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>12-0080</u> as described below. <input checked="" type="checkbox"/> Credit any overpayment. <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.				
 Anthony A. Laurentano Attorney Reg. No.: 38,220 LAHIVE & COCKFIELD, LLP 28 State Street Boston, Massachusetts 02109 (617) 227-7400			Dated: <u>May 25, 2005</u>	
I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (703) 872-9306 at MS AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below. Dated: May 25, 2005 Signature:  (Anthony A. Laurentano)				

PTO/SB/17 (12-04v2)
Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT		Attorney Docket No.	
(\$)	1,020.00	SIW-008RCE	

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 12-0080 Deposit Account Name: Lahive & Cockfield, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims 6 - 20 = x = Fee Paid (\$)

Indep. Claims 3 - 3 = x = Fee Paid (\$)

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
<u> </u> - 100 = <u> </u>	<u> </u>	<u> </u> / 50 <u> </u> (round up to a whole number) x <u> </u>	<u> </u>	<u> </u>

4. OTHER FEE(S)

Description	Fee (\$)	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)		
Other (e.g., late filing surcharge): <u>1253 Extension for response within third month</u>		<u>1,020.00</u>

SUBMITTED BY

Signature <u>Anthony A. Laurentano</u>	Registration No. (Attorney/Agent) <u>38,220</u>	Telephone <u>(617) 227-7400</u>
Name (Print/Type) <u>Anthony A. Laurentano</u>	Date <u>May 25, 2005</u>	

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (703) 872-9306 at MS AF, Commissioner for Patents, P.O. Box 1459, Alexandria, VA 22313-1450, on the date shown below.

Dated: May 25, 2005 Signature: Anthony A. Laurentano (Anthony A. Laurentano)